OKLAHOMA STATE UNIVERSITY
ENTERPRISE INFORMATION TECHNOLOGY

AFFILIATE REQUEST FORM

Complete this form to request or renew an affiliate account. All fields are required for the form to be processed.
When completed, review the security/liability statement, then print, sign and fax the signed form to 405-744-2874.

Date Submitted: ☐ **Affiliate Renewal** ☐ **New Affiliate**

AFFILIATE INFORMATION

Affiliate First Name:
Affiliate Last Name:
Affiliate Personal Email Address:
Banner ID or SSN:

If available, use the affiliate's Banner ID. If using an social security number, a copy of the social security card, numident, or military ID, must accompany this form in order to establish initial IT services. Once a Banner ID is assigned, the renewal process does not require a copy of the card.

Birth Date:
Start Date:
End Date:

The end date must be within one (1) year of the start date.

ID CARD INFORMATION

Does this affiliate need an OSU ID card?

☐ **Yes** ☐ **No**

If you checked yes, a $17 charge will be billed to the department listed below:

Bill to:
Dept. or Acct. #:

For all ID card requests, email helpdesk@okstate.edu with an attached photo of the badge recipient and an appointment request for the recipient to pick up the badge. The badge recipient must present a photo ID to pick up the badge.

REASON FOR AFFILIATION

Affiliate must not be paid by OSU through Human Resources, or have a paid assignment pending. Enter the reason for affiliation below:

SPONSOR INFORMATION

The contact person(s) will be notified when the affiliation has been processed or if questions arise. All fields are required, including the banner org. code.

Sponsor First Name:
Sponsor Last Name:
Department Name:
Phone Number:
Email:
Banner Org. Code:

ALTERNATE CONTACT

Alternate Contact First Name:
Alternate Contact Last Name:
Department Name:
Phone Number:
Email:
Banner Org. Code:

PRIVACY NOTICE

Upon receipt, this form and any attached documents will be stored in the Document Imaging Solution, encrypted and both HIPAA and FERPA compliant. If sending a social security number and/or copy of a social security card, Fax this form only. Most email is not encrypted at this time. **Do not email this form to the OSU-Stillwater IT Helpdesk at helpdesk@okstate.edu.** Doing so will generate an iSupport Ticket with the social security number embedded. This is against OSU policy. Please only use the fax number (SSN included) or email account (SSN not included) listed below.

LIABILITY STATEMENT

As sponsor of this OSU Affiliate, I understand they must abide by all current policies and procedures relating to technology use at OSU. I will ensure they are aware of these policies and procedures. Upon completion of this request, the Affiliate will have the ability to activate an O-Key account, receive Exchange Email and Active Directory file and print services, login to any IT computer lab, and obtain an OSU ID card.

Department Head Signature _____

Department Head (Print Name) _____

OSU Enterprise Information Technology Identity Management
101 IT Building, Stillwater OK, 74078 | **O:** 405-744-7887 | **F:** 405-744-2874 | id.mgmt@okstate.edu